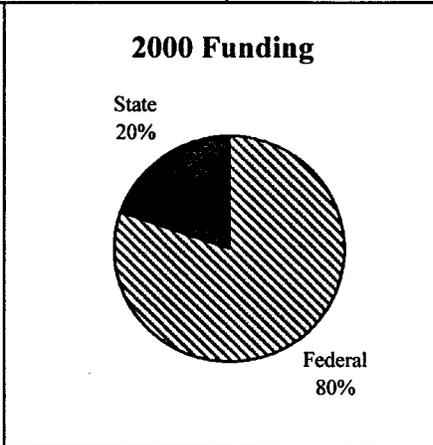
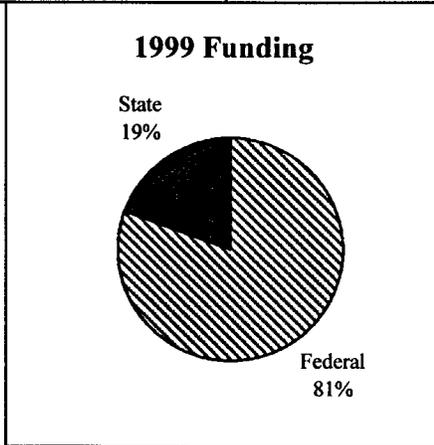
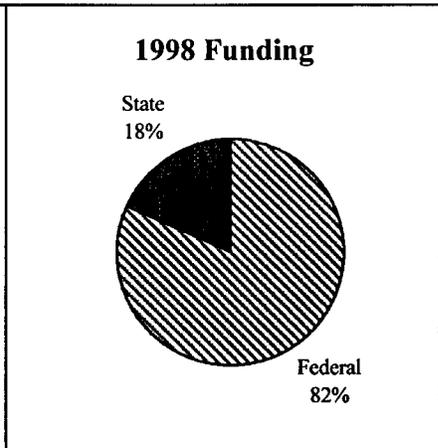
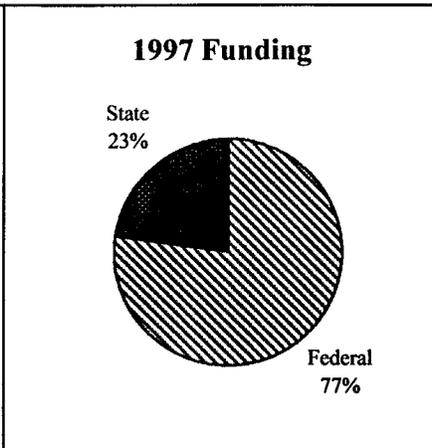
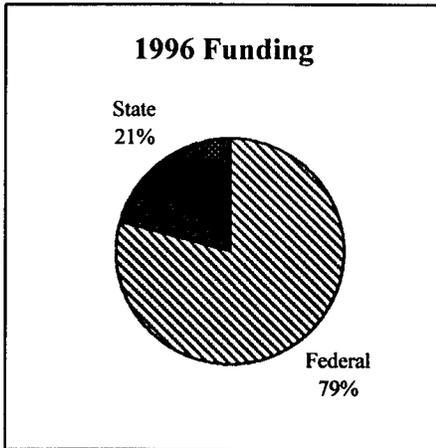
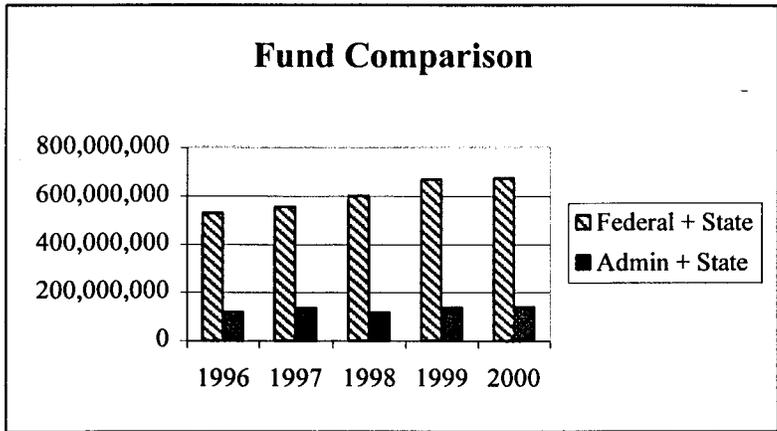
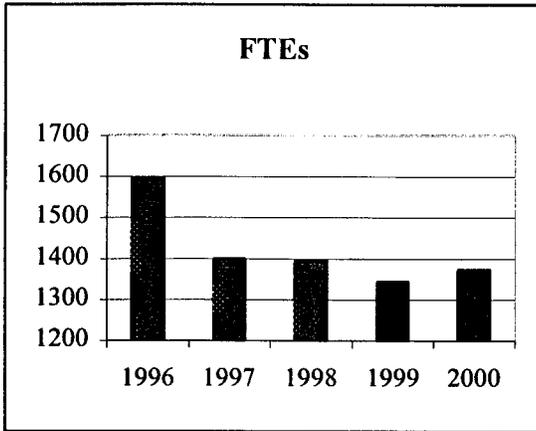


Appendix I

Agency Program Profiles

**TEXAS DEPARTMENT OF HEALTH
Major Federal Programs Less Title XIX**

Fiscal Year	Federal	Administrative	State	FTEs
2000	541,400,168	6,754,534	132,257,259	1,372.3
1999	537,247,469	6,530,699	129,461,652	1,342.6
1998	489,946,622	6,703,401	109,675,204	1,394.9
1997	428,571,516	6,772,965	127,102,857	1,399.8
1996	417,974,342	7,933,288	109,769,871	1,597.3

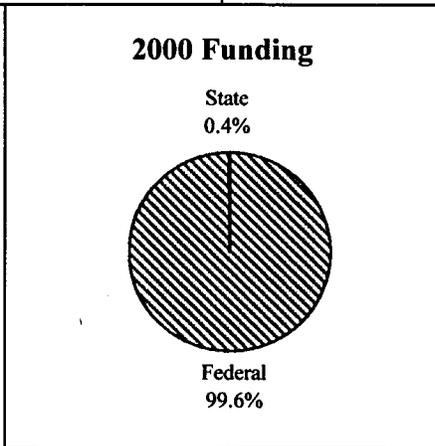
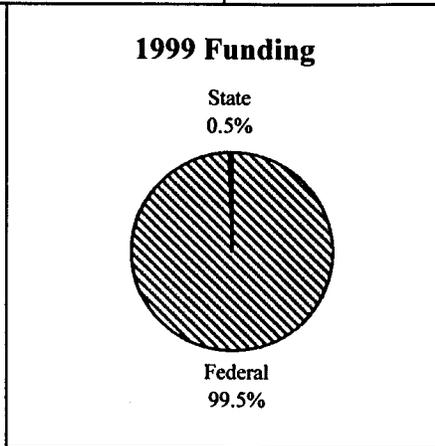
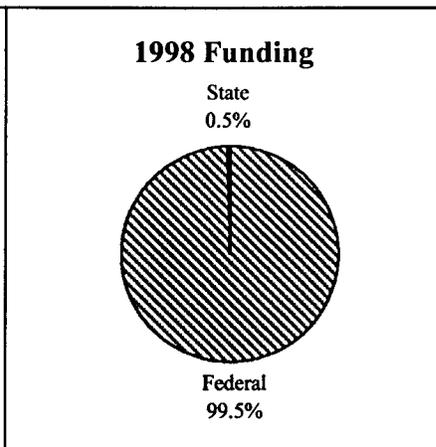
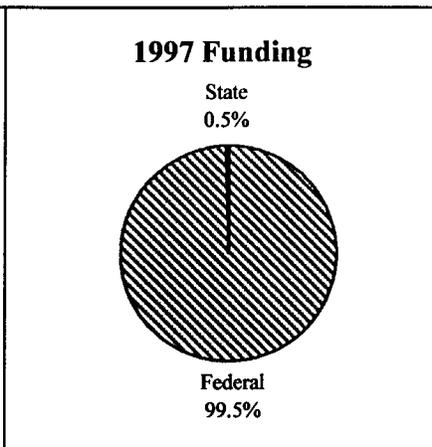
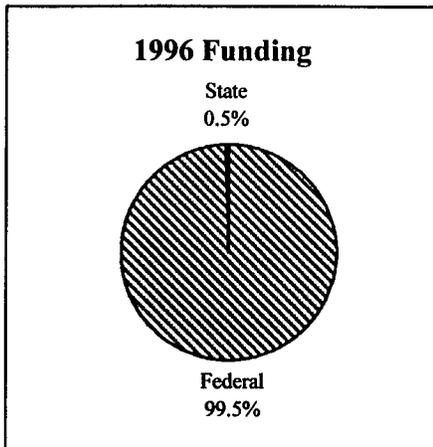
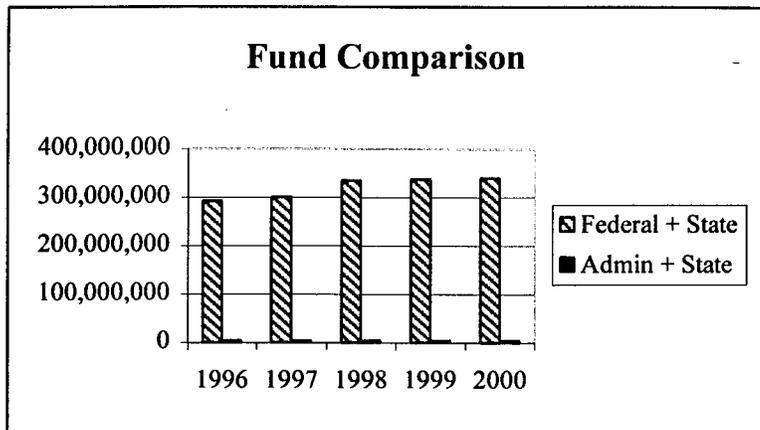
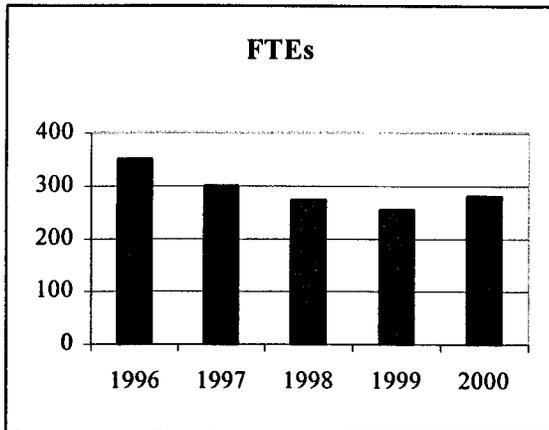


TEXAS DEPARTMENT OF HEALTH
Prepared for Senate State Affairs Committee

Program	Women, Infants, and Children (WIC) Special Supplemental Food Program
Purpose	WIC is a food and nutrition program that serves as an adjunct to good health care intended to prevent the occurrence of health problems and improve the health status of participants during critical times of growth and development. Its purpose is to provide nutrition education and food assistance to those categories of people who have been found to be the most vulnerable to the effects of malnutrition and to achieve optimal nutritional status for children prior to entry into school.
When Program Started	The federal program began in 1974 and Texas began receiving funds that same year.
Major Programmatic Changes in the Program due to a shift in federal funds	None
What is Texas required to do to access funds?	Submit a state plan to USDA for approval on an annual basis and comply with federal regulations and reporting requirements.
What are some of the barriers to obtaining additional federal funds (include any state statutory barriers)?	There are no anticipated increases in the federal appropriation for the WIC Program. Opportunities for obtaining additional federal funds for Texas are limited to the periodic reallocation of funds that states have returned or the application for WIC infrastructure grants that become available.
Is there duplication of services, reporting, etc. If so, with what agencies.	No
Are the administrative costs commensurate with the benefits derived from the program? Is the program useful (i.e. Does it fit the need of Texas)?	Yes. Yes. This program ensures better nutrition for pregnant women, breastfeeding mothers, infants, and children to age 5.
How will the agency adjust to a total withdrawal of federal funds?	WIC services would no longer be provided.
How will the agency adjust to a partial decline in federal dollars?	Reduction in number of WIC participants served, benefits provided or variety of food brands offered.
Any Suggestions?	Program needs capital authority at beginning of year to use federal reallocations not granted until the end of a year to allow for use of those funds

TEXAS DEPARTMENT OF HEALTH
Special Supplemental Nutrition Program for Women, Infants and Children (WIC)

Fiscal Year	Federal	Administrative	State	FTEs
2000	338,543,329	2,440,466	1,382,390	280.3
1999	335,590,224	1,922,343	1,540,094	254.5
1998	332,119,513	2,215,364	1,540,094	272.7
1997	298,984,787	1,971,600	1,540,094	299.8
1996	290,896,733	2,426,961	1,540,094	350.6



TEXAS DEPARTMENT OF HEALTH
Prepared for Senate State Affairs Committee

Program	Social Services Block Grant (Title XX) and Temporary Assistance to Needy Families - TANF (to be used as Title XX)
Purpose	Provide family planning services for all Title XX eligible clients. Assist low income individuals, men, women, and adolescents (age 19 and younger) - to improve their health status, reduce unintended pregnancies, and positively affect the outcomes of future pregnancies.
When Program Started	The federal program began in 1981 TDH began receiving funds - 1993
Major Programmatic Changes in the Program due to a shift in federal funds	1998 - Allocated TANF dollars from DHS to replace State GR funding 1999 - \$3.2 M reduction in allocation of Title XX/TANF funds from DHS 2000 – Reallocation of TANF dollars by DHS to restore the FY 99 funding cut.
What is Texas required to do to access funds?	Submit quarterly reports to the Texas Department of Human Resources. The program submits information for the annual Intended Use Report.
What are some of the barriers to obtaining additional federal funds (include any state statutory barriers)?	Possible reductions in Social Service Block Grant at the national level. Possible reductions in allocations from DHS as other agencies/programs compete for Title XX funds.
Is there duplication of services, reporting, etc. If so, with what agencies.	No
Are the administrative costs commensurate with the benefits derived from the program? Is the program useful (i.e. Does it fit the need of Texas)?	Yes. Approximately 90% of the funds are allocated to family planning providers for service delivery. Yes. This program provides low income persons access to health care to improve their health status, reduce unintended pregnancies, and positively affect the outcomes of future pregnancies.
How will the agency adjust to a total withdrawal of federal funds?	Reduce or eliminate services. Restructure/redesign the family planning program.
How will the agency adjust to a partial decline in federal dollars?	Same as above. Reduce allocations to family planning contractors.
Any Suggestions?	Continued reduction in federal funding levels will jeopardize states' ability to address unmet needs, increasing population, and cost inflation.

TEXAS DEPARTMENT OF HEALTH
Title XX Social Services Block Grant and TANF (to be used as Title XX)

Fiscal Year	Federal	Administrative	State	FTEs
2000	30,647,726	152,161	0	7.4
1999	27,287,309	227,534	0	7.8
1998	29,887,211	195,653	0	7.3
1997	13,640,218	92,308	16,770,417	7.8
1996	18,751,054	50,714	11,966,164	8.4

